## APPLICATION DATA SHEET

## APPLICATION INFORMATION

Application Type::

Subject Matter::

CD BOM or CD BO::

CD-ROM or CD-R?:: NONE

Title:: A FUNCTIONAL FLUID AND THE USE

THEREOF

Attorney Docket Number:: 240932US0

## **INVENTOR INFORMATION**

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: US

Status:: FULL CAPACITY

Given Name:: Douglas

Middle Name:: G

Family Name:: PLACEK
City of Residence:: Yardley

State or Province of Residence:: PA

Street of Mailing Address:: 1508 Pownal Drive

City of Mailing Address:: Yardley
State or Province of Mailing Address:: PA
Postal or Zip Code of Mailing Address:: 19067

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: US

Status:: FULL CAPACITY

Given Name:: Bernhard

Middle Name:: G

Family Name:: KINKER
City of Residence:: Kintnersville

State or Province of Residence:: PA

Street of Mailing Address:: 4515 Durham Road

City of Mailing Address:: Kintnersville

State or Province of Mailing Address:: PA
Postal or Zip Code of Mailing Address:: 18930

Applicant Authority Type:: **INVENTOR** 

Primary Citizenship Country:: US

Status:: **FULL CAPACITY** 

Given Name:: David J

Middle Name::

Family Name:: COOPER

Name Suffix:: Jr.

City of Residence:: Quakertown

State or Province of Residence:: PA

Street of Mailing Address:: 221 South Third Street

City of Mailing Address:: Quakertown

State or Province of Mailing Address:: PA Postal or Zip Code of Mailing Address:: 18951

Applicant Authority Type:: **INVENTOR** 

Primary Citizenship Country:: US

Status:: **FULL CAPACITY** 

Given Name:: Robert

Middle Name:: Р

Family Name:: SIMKO

City of Residence:: Norristown

State or Province of Residence:: PA

Street of Mailing Address:: 545 George Street

City of Mailing Address:: Norristown

State or Province of Mailing Address:: PA Postal or Zip Code of Mailing Address:: 19401

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

ASSIGNMENT INFORMATION

RohMax Additives GmbH Assignee Name::

Street of Mailing Address:: Kirschenallee City of Mailing Address:: Darmstadt

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Country of Mailing Address:: Germany Postal or Zip Code of Mailing Address:: D-64293

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